


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 13, 2005 8:00 am**  
**Secretary of State**

04-13-2005 90027 024 \*\*\*150.00

**DOCUMENT # F96000004678**

1. Entity Name  
**KSI PROPERTIES, INC.**



Principal Place of Business  
**999 WEST BIG BEAVER ROAD, SUITE 601  
 TROY, MI 48084**

Mailing Address  
**999 WEST BIG BEAVER ROAD, SUITE 601  
 TROY, MI 48084**

**20030865**



2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

04062005 Chg-P CR2E034 (10/03)

4. FEI Number  
**38-2964567**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324**

**7. Name and Address of New Registered Agent**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

**\* PLEASE SEE ATTACHED**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE CP  Delete  
 NAME ADDERLEY, TERENCE E  
 STREET ADDRESS 999 WEST BIG BEAVER ROAD, SUITE 601  
 CITY-ST-ZIP TROY, MI 48084

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE SVS  Delete  
 NAME REARDON, GEORGE M  
 STREET ADDRESS 2474 JOHN R 101  
 CITY-ST-ZIP TROY, MI 48083

TITLE PCOD  Change  Addition  
 NAME Carl Camden  
 STREET ADDRESS 1780 Kensington Rd.  
 CITY-ST-ZIP Bloomfield Hills, MI 48304

TITLE VF  Delete  
 NAME MORROW, GREGORY C  
 STREET ADDRESS 4612 MILL POND  
 CITY-ST-ZIP TROY, MI 48098

TITLE CFD  Change  Addition  
 NAME Michael L. Durik  
 STREET ADDRESS 999 W. Big Beaver Rd.  
 CITY-ST-ZIP Troy, MI 48084

TITLE SVCF  Delete  
 NAME GERBER, WILLIAM K  
 STREET ADDRESS 519 HARMON AVE  
 CITY-ST-ZIP BIRMINGTON, MI 48009

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes; I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mike F. Orsini **Mike F. Orsini** V.P., TAX 4/6/05 (248)244-4277  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #